STATEMENT OF

FORM 1	ORGANIZAT (See instructions)	ION	Office use only
NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
BRICK INDUS	TRY ASSOCIATION'S BRICK PAC FO	R A STRONGER AMERI	CA (Brick
ADDRESS (number and	·	K DR SUITE 301	
(Check if address is changed)	RESTON		VA 20191 -
	CIT	Y_	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)			
(Check if address is changed)			
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
(Check if address is changed)			
2. DATE M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION NUMBER C C00429712			
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowled	ge and belief it is true, correct and	l complete
Type or Print Name of	Treasurer Ray Leonhard		
Signature of Treasurer	Electronically Filed by Ray Leonhard	<u> </u>	Date 03 / 25 / 2009
NOTE: Submission of fa	se, erroneous, or incomplete information may sub		· · · · · · · · · · · · · · · · · · ·
Office Use Only		For further information of Federal Election Commissi Toll Free 800-424-9530	